

DYSPHAGIA CARE PLAN

John Doe

2-22-06

Level 2 risk

GASTRITIS, ASPIRATION RISK, CHOKING RISK, ORAL AND PHARYNGEAL DYSPHAGIA

TRIGGERS

- Wet Vocal Quality
- Vomiting
- Sudden Change in Breathing
- Watery eyes
- Total meal refusals (X 2)-nursing notified.
- Pocketing of food in mouth
- Hyper extends neck despite use of compensatory strategies (placing hand behind head on neck)
- Weight loss/gain of 5lbs in a month

IF YOU NOTICE ONE OR MORE OF THE ABOVE TRIGGERS, ATTEMPT TO SELF CORRECT (make sure dysphagia plan is being followed correctly) IF TRIGGER IS OBSERVED AGAIN, DOCUMENT ON FLOW CHART AND NOTIFY NURSE.

NUTRITION AND MEALTIME

- Pureed foods
- Gels are preferred method of fluids, however, _____ can tolerate **Honey-thick liquids.**
- Ignore Head shaking during meal.
- Cue him to take bite by placing spoon at his lips

- W/C is used whenever he is fed or given snacks, fluids or medications by mouth.

ORAL CARE AND MEDICATION

- Toothbrush dipped in Act Fluoride rinse or Hydrogen Peroxide.
 - Shake off excess liquid
 - Rub teeth and gums vigorously.
 - Clean upper teeth and gums
 - Allow _____ to rest for a few seconds
 - Clean lower teeth and gums
 - Have _____ spit out any residue
- Perform Oral Care x 3 Daily
- Wheelchair “meal position” is used during oral care and medication administration
- Meds are taken orally with pudding followed with water to facilitate swallowing

GENERAL POSITIONING

- ATTENDS CHANGES ARE DONE ON BED SLIGHTLY ELEVATED OR ON SHOWER TROLLEY AT 5 DEGREES OF ELEVATION (by design, the trolley provides 5 degrees of elevation)
- SHOWERING IS AT 5 DEGREES.